

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | MW | | 05-17-01 |
| O.I.P.E. CLASSIFIER | | 8 | 6-4-01 |
| FORMALITY REVIEW | SI | 1021 | 07/16/01 |
| RESPONSE FORMALITY REVIEW | A. M. JC | 5802 | 01-16-02 |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
|----------------|------|
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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MS
07/16/01
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